function after PBMV improved significantly than before PBMV (p < 0.01)

Conclusions PBMV is a safe and appropriate therapy with good short-term results for selected patients with mitral stenosis.

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ANALYSIS OF 293 CASES AFTER PERCUTANEOUS BALLOON MITRAL VALVULOPLASTY

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Objectives To observe the short-term results and appropriateness of the use of percutaneous balloon mitral valvuloplasty (PBMV) on the patients with rheumatic mitral stenosis.

Methods 293 patients with rheumatic mitral stenosis underwent percutaneous balloon mitral valvuloplasty (PBMV) with the Inoue balloon catheter. MVA, MPG, PAP, LAP, LAD, CO, the cardiac function (NYHA) and value notice variables were assessed at before and after PBMV.

Results The mitral valve areas after PBMV is significantly larger than before PBMV. Blood dynamic factors and cardiac

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